

## ARIZONA DEPARTMENT OF HEALTH SERVICES DIVISION OF BEHAVIORAL HEALTH SERVICES DIVISION DOCUMENT REVISION NOTICE

The Arizona Department of Health Services/Division of Behavioral Health Services has revised the below referenced document(s), indicated by **BOLD** print and the symbol **[X]**. The attached memorandum includes a detailed description of the changes impacting the selected document(s). The revised document(s) will be posted to the ADHS/DBHS website on or around April 4, 2007. Please direct any questions regarding this Division document revision notice to Janice Hippe at (602) 364-4655 or via electronic mail at [hippej@azdhs.gov](mailto:hippej@azdhs.gov).

<b>DIVISION DOCUMENT</b>	ADHS/DBHS PROVIDER MANUAL	ADHS/DBHS POLICY AND PROCEDURES MANUAL	ADHS/DBHS PROGRAM SUPPORT PROCEDURES MANUAL	<b>ADHS/DBHS COVERED BEHAVIORAL HEALTH SERVICES GUIDE</b>
<b>REVISION [X]</b>				<b>[X]</b>
<b>DIVISION DOCUMENT</b>	CLIENT INFORMATION SYSTEM (CIS) FILE LAYOUT AND SPECIFICATIONS MANUAL	OFFICE OF GRIEVANCE AND APPEALS DATABASE MANUAL	ADHS ACCOUNTING AND AUDITING PROCEDURES MANUAL	FINANCIAL REPORTING GUIDE FOR REGIONAL BEHAVIORAL HEALTH AUTHORITIES
<b>REVISION [X]</b>				
<b>DIVISION DOCUMENT</b>	ADHS/DBHS QUALITY MANAGEMENT/UTILIZATION MANAGEMENT PLAN	ADHS/DBHS PREVENTION FRAMEWORK FOR BEHAVIORAL HEALTH	AHCCCS MEDICAL POLICY MANUAL-CHAPTERS 900 AND 1000	ADHS/DBHS STRATEGIC PLAN
<b>REVISION [X]</b>				
<b>DIVISION DOCUMENT</b>	ADHS/DBHS CULTURAL COMPETENCE PLAN	ADHS/DBHS CLINICAL GUIDANCE DOCUMENTS	TITLE XIX CHILDREN'S BEHAVIORAL HEALTH ANNUAL ACTION PLAN	
<b>REVISION [X]</b>				

**Arizona Department of Health Services  
Division of Behavioral Health Services  
Memorandum**

**Date:** April 4, 2007  
**To:** Stakeholders  
**From:** Margaret Russell, Bureau Chief of Policy  
**Re:** **Final Changes to the ADHS/DBHS Covered Behavioral Health Services Guide**

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The following is a summary of the final revisions to the ADHS/DBHS Covered Behavioral Health Services Guide, Version 6.1. The final revisions will be posted to the ADHS/DBHS website on or around April 4, 2007. Please note that the Memorandum distributed on March 6, 2007, included **PROPOSED** changes to the guide. The changes described in this Memorandum represent the **FINAL** changes that are to be implemented by Tribal and Regional Behavioral Health Authorities and their contracted behavioral health providers.

Section 1. F. 6. Diagnosis Codes

1. The language from the 6.0 Version was changed back to the language used in the 5.9 version. ADHS/DBHS is currently working with AHCCCS to clarify the appropriate use of V-codes. Clarification on the use of V-codes will be reflected in subsequent versions to the ADHS/DBHS Covered Behavioral Health Services Guide.
2. Removed "(see Provider Manual Attachment 7.5.4, Behavioral Health Services Diagnostic Code Table)" from 5<sup>th</sup> paragraph as this attachment will no longer be used in conjunction with Provider Manual Section 7.5. Replaced with "(see 2007 ICD-9-CM manual)".

REPLACE PAGES 21-23

Section I. F. 7. b. Core Provider Travel Billing Limitations

1. Added additional bullet point stating: "If a behavioral health professional, behavioral health technician or behavioral health paraprofessional travels to provide case management services or provider type 85, 86, 87 or A4 travels to provide services to a client and the client misses the appointment, the intended service may not be billed. However, the provider may bill for the full mileage traveled (even if the mileage is less than 25 miles) for the missed appointment. The provider should use service code A0160 for billing and report actual miles traveled".

REPLACE PAGE 25

Section II. A. 1. Behavioral Health Counseling and Therapy

1. Under code specific information for HCPCS code H0004 HQ (Group Behavioral Health Counseling and Therapy), removed the word "Office".
2. Under code specific information for HCPCS code H0004 HQ (Group Behavioral Health Counseling and Therapy), a footnote has been added to allow for specialized group counseling (i.e. child sexual offender treatment) to be billed on the same day as Level I Residential Treatment Center and Behavioral Health Short-Term Residential Services,

under certain circumstances. The following footnote has been added to the HCPCS code H0004 HQ description: "Generally, H0004 HQ (Group Behavioral Health Counseling and Therapy) may not be billed on the same day as Level I Residential Treatment Center (0114, 0124, 0134, 0154, 0116, 0126, 0136 or 0156) or Behavioral Health Short-Term Residential (H0018, H0019) Services. However, based on behavioral health recipient needs, certain specialized group behavioral health counseling and therapy services may be billed on the same day as Level I Residential Treatment Center or Behavioral Health Short-Term Residential Services. The clinical rationale for providing specialized group behavioral health counseling and therapy services must be specifically documented in the Service Plan and Progress Note. ADHS/DBHS has created a quarterly report to monitor the appropriate use of H0004 HQ when billed on the same day as Level I Residential Treatment Center or Behavioral Health Short-Term Residential services.

REPLACE PAGE 32

Section II. A. 2. Assessment, Evaluation and Screening Services

1. Under code specific information for CPT code 99308, corrected typo by changing the number "1" to the word "to".
2. Under code specific information for HCPCS code H0001 (Alcohol and/or drug assessment), changed the billing unit to "1" as AHCCCS has changed the billing unit to 1.
3. Under code specific information for HCPCS code H0002 (Behavioral health screening to determine eligibility for admission to treatment program), added place of service POS 21 (Inpatient Hospital) and POS 51 (Inpatient Psychiatric Facility) per AHCCCS approval.
4. Under code specific information for HCPCS code H0031 (Mental health assessment by non-physician), added place of service POS 21 (Inpatient Hospital) and POS 51 (Inpatient Psychiatric Facility) per AHCCCS approval.

REPLACE PAGES 37-39

Section II. B. 3. Behavioral Health Prevention/Promotion Education and Medication Training and Support Services (Health Promotion)

1. Under code specific information for HCPCS code H0034 (Medication Training and Support), removed billing provider type A3 (Community Service Agency).

REPLACE PAGE 51

Section II. C. 3. Medical Management

1. Under code specific information for CPT code 99308, corrected typo by changing the number "1" to the word "to".

REPLACE PAGE 70

Section II. D. 9. Non-Medically Necessary Covered Services

1. Under "Billing Limitations for Medicare Part D Premium (Not considered use of flex funds)", added reference to Provider Manual Section 3.21, Service Prioritization for Non-Title XIX/XXI Funding.

2. Second and third paragraph deleted due to duplication of information that already is present in Provider Manual Section 3.21, Service Prioritization for Non-Title XIX/XXI Funding.

REPLACE PAGE 105

Section II. F. Inpatient Service

1. Under code specific information for CPT code 99308, corrected typo by changing the number "1" to the word "to".

REPLACE PAGE 134

Section II. F. 1. Hospital

1. Changed the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) to The Joint Commission per AHCCCS.
2. Added language to the Service Standards/Provider Qualifications at the beginning of the third statement, "For adults age 21 or over", per AHCCCS.
3. Added language to the Service Standards/Provider Qualifications at the beginning of the fourth statement, "For adults age 21 or over", per AHCCCS.

REPLACE PAGE 136

Section II. F. 2. Subacute Facility

1. Changed JCAHO to The Joint Commission per AHCCCS.

REPLACE PAGE 138

Section II. F. 3. Residential Treatment Center

1. Changed JCAHO to The Joint Commission per AHCCCS.

REPLACE PAGE 140

Appendix B-2, ADHS/DBHS Allowable Procedure Code Matrix:

1. Added POS 21 (Inpatient Hospital) and 51 (Inpatient Psychiatric Facility) to H0002 (Behavioral health screening to determine eligibility for admission to treatment program) and H0031 (Mental health assessment, by non-physician) per approval from AHCCCS.
2. Changed HCPCS code H0001 (Alcohol and/or drug assessment) unit from 999 to 1 and rate from "BR" to \$14.70 per AHCCCS.
3. Removed the word "Office" from HCPCS code H0004 HQ (Group Behavioral Health Counseling and Therapy).
4. Removed Provider Type A3 (Community Service Agency) from H0034 (Medication training and support).
5. Changed units from 5 to 7 for CPT code 80101 per AHCCCS update.

REPLACE APPENDIX B-2

Appendix B-5, Billing Limitations Matrix:

1. H0004 HQ (Group Counseling) has been removed from the B-5 Billing Limitations Appendix.

REPLACE APPENDIX B-5

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**Summary of Replacement Appendices and Page Numbers**

<b>Section</b>	<b>Replace</b>
Covered Services Guide	Pages 21-23, 25, 37-39, 51, 70, 105, 134, 136, 138 and 140
Appendix B-2	Entire Appendix
Appendix B-5	Entire Appendix